

<b>Issue Classification</b> 	Application/Control No.	Applicant(s)/Patent under Reexamination
	10/615,787	OOSAWA ET AL.
	Examiner Jimmy Nguyen	Art Unit 2829

<b>ISSUE CLASSIFICATION</b>							
ORIGINAL		CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
324	763	324	158.1    765    754				
INTERNATIONAL CLASSIFICATION		438	17				
G	0 1 R	31/02	714    719				
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<div style="display: flex; align-items: center; justify-content: space-between;"> <div style="flex: 1; text-align: center;"> <p><b>JIMMY NGUYEN</b> 3/16/05 (Assistant Examiner) (Date)</p> <p><i>J. M. Nguyen</i> 3/21/05 (Legal Instruments Examiner) (Date)</p> </div> <div style="flex: 1; text-align: center;"> <p><i>Vinh Nguyen</i> <b>VINH NGUYEN</b> <b>PRIMARY EXAMINER</b> A.u. 2829 A 03/18/05 (Primary Examiner) (Date)</p> </div> <div style="flex: 1; text-align: center;"> <p>Total Claims Allowed: 9</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input type="checkbox"/> O.G. Print Claim(s)</td> <td style="width: 50%; text-align: center;"><input type="checkbox"/> O.G. Print Fig.</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table> </div> </div>				<input type="checkbox"/> O.G. Print Claim(s)	<input type="checkbox"/> O.G. Print Fig.	1	2
<input type="checkbox"/> O.G. Print Claim(s)	<input type="checkbox"/> O.G. Print Fig.						
1	2						

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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6		36		66	96	126	156
7		37		67	97	127	157
8		38		68	98	128	158
9		39		69	99	129	159
10		40		70	100	130	160
11		41		71	101	131	161
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16		46		76	106	136	166
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